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Bib Data Sheet

CONFIRMATION NO. 4421

<b>SERIAL NUMBER</b> 09/932,393	<b>FILING DATE</b> 08/17/2001 <b>RULE</b>	<b>CLASS</b> 528	<b>GROUP ART UNIT</b> 1712	<b>ATTORNEY DOCKET NO.</b> 5050JP
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## APPLICANTS

Tony M. Pearce, Alpine, UT

## \*\* CONTINUING DATA \*\*\*\*\*

THIS APPLICATION IS A CIP OF 09/303,979 05/03/1999, PAT 6413458  
WHICH IS A CIP OF 08/968,750 08/13/1997 PAT 6,026,527  
WHICH IS A CIP OF 08/601,374 02/14/1996 PAT 5,749,111  
WHICH IS A CIP OF 08/783,413 01/10/1997 PAT 5,994,450  
WHICH CLAIMS BENEFIT OF 60/021,019 07/01/1996  
AND CLAIMS BENEFIT OF 60/226,726 08/18/2000

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* ~~SMALL ENTITY~~ \*\*

\*\* 10/03/2001

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY UT	SHEETS DRAWING 1	TOTAL CLAIMS 18	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

## ADDRESS

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## TITLE

Cushions with non-intersecting-columnar elastomeric members exhibiting compression instability

<b>FILING FEE RECEIVED</b> 355	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees ( Filing )
		<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
		<input type="checkbox"/> 1.18 Fees ( Issue )
		<input type="checkbox"/> Other _____
		<input type="checkbox"/> Credit